



2015 NPDES Multi-Sector General Permit For Stormwater Discharges Associated With Industrial Activity (MSGP) Forms

United States Environmental Protection Agency
1200 Pennsylvania Ave, NW Washington, DC 20460

Note: This is a "smart form"; as you fill out the form, additional questions will appear that you will need to answer.

Permit Information

1. What action would you like to take? *

File a New Notice of Intent Form

Submission of this Notice of Intent (NOI) constitutes notice that the operator identified in the Facility Operator Information section of this form requests authorization to discharge pursuant to the NPDES Stormwater Multi-Sector General Permit (MSGP) permit number identified in the Permit Information section of this form. Submission of this NOI also constitutes notice that the operator identified in the Facility Operator Information section of this form meets the eligibility conditions of Part 1.1 of the MSGP for the facility identified in the Facility Information section of this form. To obtain authorization, you must submit a complete and accurate NOI form. Discharges are not authorized if your NOI is incomplete or inaccurate or if you were never eligible for permit coverage.

Operator Name (Organization Name) *

SUPERIOR CONCRETE SW

Operator Name as Noted by the NOI Preparer

Superior Concrete Materials Inc.

2. Select the state/territory where your facility is located *

DC

3. Is your facility located on Indian Country lands? *

☐ Yes

☒ No

4. Are you requesting coverage as a "federal operator" as defined in Appendix A? *

☐ Yes

☒ No

5. Are you a new discharger or a new source as defined in Appendix A? *

☒ Yes

☐ No

6. Do you directly discharge to any of the waters of the U.S. that are designated by the state or tribal authority under its antidegradation policy as a Tier 3 water (Outstanding National Resource Water) (See Appendix L)? Your project will be considered to discharge to a Tier 3 water if the first water of the US to which you discharge is identified by a state, tribe, or EPA as a Tier 3 water. For discharges that enter a storm sewer system prior to discharge, the first water of the US to which you discharge is the waterbody that receives the stormwater discharge from the storm sewer system. *

☐ Yes

☒ No

7. Does your facility directly discharge to a Federal CERCLA site listed in Appendix P? For the purposes of this permit, a permittee discharges to a Federal CERCLA site if the discharge flows directly into the site through its own conveyance, or through a conveyance owned by others, such as a municipal separate storm sewer system. *

☐ Yes

☒ No

8. Has the Stormwater Pollution Prevention Plan (SWPPP) been prepared in advance of filing this NOI, as required? *

☒ Yes

☐ No

9. By indicating "Yes", I confirm that I understand that the MSGP only authorizes the allowable stormwater discharges in Part 1.1.2 and the allowable non-stormwater discharges listed in Part 1.1.3. Any discharges not expressly authorized in this permit cannot become authorized or shielded from liability under CWA section 402(k) by disclosure to EPA, state, or local authorities after issuance of this permit via any means, including the Notice of Intent (NOI) to be covered by the permit, the Stormwater Pollution Prevention Plan (SWPPP), during an inspection, etc. If any discharges requiring NPDES permit coverage other than the allowable stormwater and non-stormwater discharges listed in Parts 1.1.2 and 1.1.3 will be discharged, they must be covered under another NPDES permit. *

☒ Yes

☐ No

10. Master Permit Number

DCR050000

A: Facility Operator Information

1. Operator Name (Organization Name) *

SUPERIOR CONCRETE SW

2. Street *

1700 Half St., SW

3. Supplemental Address

4. City *

Washington

5. State/Province *

DC

6. ZIP Code *

20003

7. Facility County or Similar Govt. Subdivision *

District of Columbia

8. Phone (10-digits, No dashes) *

3015778800

9. Extension

10. E-Mail *

waguirre@us-concrete.com

Operator point of contact information

11. First Name *

Wayne

12. Middle Initial

13. Last Name *

Aguirre

14. Professional Title *

Operations Manager, Superior Concrete

B: Facility Information

1. Facility Name *

Superior Concrete Materials Inc.

2. Street/Location *

1700 Half St., SW

3. Supplemental Address

4. City *

Washington

5. State *

DC

6. ZIP Code *

20003

7. Facility County or Similar Govt. Subdivision *

District of Columbia

Latitude/Longitude for the facility:

8. Latitude (Decimal Degrees) *

+

38.866634

9. Longitude (Decimal Degrees) *

-

77.009586

10. Latitude/Longitude Data Source *

Other

11. Horizontal Reference Datum

WGS84

12. What is the ownership type of the facility? *

Corporation

13. Estimated area of industrial activity at your facility exposed to stormwater (to the nearest quarter acre) *

2.00

Identify the applicable sector and subsector of your primary industrial activity (See Appendix D) that best represents the products produced or services rendered for which your facility is primarily engaged, as defined in the MSGP, and the 4-digit Standard Industrial Classification (SIC) code or 2-letter Activity Code:

15. Sector *	16. Primary SIC Code *
SECTOR E: GLASS, CLAY, CEMENT, CONCRETE, AND GYPSUM PRODUCTS	3273: Ready-Mixed Concrete

17. Subsector

E2: Concrete, Gypsum, and Plaster Products

☐ Check to add an additional Sector and Subsector.

22. Is your facility presently inactive and unstaffed? *

☐ Yes ☒ No

C: Discharge Information

3. Identify if the following Effluent Limitation Guideline(s) apply to any of your discharges

40 CFR Part/Subpart: Part 411, Subpart C	Eligible Discharges: Runoff from material storage piles at cement manufacturing facilities	Affected MSGP Sector: E	New Source Date: 2/20/1974	Does your facility have any discharges subject to this effluent limitation guideline? *
				<input type="radio"/> Yes <input checked="" type="radio"/> No

Outfalls

4. List all of the stormwater outfalls from your facility. Each outfall must be identified by a unique 3-digit ID (e.g., 001, 002) or a 4-digit ID. Also provide the latitude and longitude in decimal degrees for each outfall.

A. Outfall ID *		B. Latitude (Decimal Degrees) *		C. Longitude (Decimal Degrees) *
001	+	38.868450	-	77.009371

(This button will prepopulate the receiving water information associated with your outfall on your form. You may edit the information that is returned if you believe it is incorrect)

If for any reason the Lookup Receiving Water Information button does not prepopulate your form with receiving waters information, you must manually enter the information on your form.

Outfall Section

1. Provide the name of the first water of the U.S that receives stormwater directly from the outfall and/or from the MS4 that the outfall discharges to. (You may edit the name of the water of the U.S. that was returned if incorrect.) *

Anacostia DC

2. Is the receiving water listed as impaired on the 303(d) list and in need of a TMDL? *

☒ Yes ☐ No

4. List the pollutants that are causing the impairment:

Please select the cause group and pollutant for which the waterbody is impaired:

Cause Group *	Pollutant *
METALS (OTHER THAN MERCURY)	Arsenic, total [as As]
Please select the cause group and pollutant for which the waterbody is impaired:	
Cause Group *	Pollutant *
ORGANIC ENRICHMENT/OXYGEN DEPLETION	BOD, 5-day, 20 deg. C
Please select the cause group and pollutant for which the waterbody is impaired:	
Cause Group *	Pollutant *
PESTICIDES	Chlordane
Please select the cause group and pollutant for which the waterbody is impaired:	
Cause Group *	Pollutant *
METALS (OTHER THAN MERCURY)	Copper, total [as Cu]
Please select the cause group and pollutant for which the waterbody is impaired:	
Cause Group *	Pollutant *
PESTICIDES	2,4-DDD [O,P-DDD]
Please select the cause group and pollutant for which the waterbody is impaired:	
Cause Group *	Pollutant *
PESTICIDES	DDE
Please select the cause group and pollutant for which the waterbody is impaired:	
Cause Group *	Pollutant *
PESTICIDES	DDT
Please select the cause group and pollutant for which the waterbody is impaired:	
Cause Group *	Pollutant *
TRASH	Debris, floating [severity]
Please select the cause group and pollutant for which the waterbody is impaired:	
Cause Group *	Pollutant *
PESTICIDES	Dieldrin
Please select the cause group and pollutant for which the waterbody is impaired:	
Cause Group *	Pollutant *
PATHOGENS	Coliform, fecal general

Please select the cause group and pollutant for which the waterbody is impaired:

Cause Group *

PESTICIDES

Pollutant *

Heptachlor epoxide

Please select the cause group and pollutant for which the waterbody is impaired:

Cause Group *

METALS (OTHER THAN MERCURY)

Pollutant *

Lead, total [as Pb]

Please select the cause group and pollutant for which the waterbody is impaired:

Cause Group *

NUTRIENTS

Pollutant *

Nitrogen, total

Please select the cause group and pollutant for which the waterbody is impaired:

Cause Group *

OIL AND GREASE

Pollutant *

Oil & Grease

Please select the cause group and pollutant for which the waterbody is impaired:

Cause Group *

NUTRIENTS

Pollutant *

Phosphorus, total [as P]

Please select the cause group and pollutant for which the waterbody is impaired:

Cause Group *

POLYCHLORINATED BIPHENYLS (PCBS)

Pollutant *

Polychlorinated biphenyls [PCBs]

Please select the cause group and pollutant for which the waterbody is impaired:

Cause Group *

TOXIC ORGANICS

Pollutant *

Polynuclear Aromatic Hydrocarbons [PAHs]

Please select the cause group and pollutant for which the waterbody is impaired:

Cause Group *

TURBIDITY

Pollutant *

Solids, total suspended

Please select the cause group and pollutant for which the waterbody is impaired:

Cause Group *

METALS (OTHER THAN MERCURY)

Pollutant *

Zinc, total [as Zn]

3. Has a TMDL been completed for this receiving waterbody? *

☒ Yes ☐ No

TMDL Name *	TMDL ID	Pollutant Name *
ANACOSTIA RIVER	59541	FECAL COLIFORM
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	26066	BIOCHEMICAL OXYGEN DEMAND (BOD)
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	26067	SUSPENDED SOLIDS
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	26068	FECAL COLIFORM
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	26069	ORGANICS
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	26070	ORGANICS
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	26071	ORGANICS
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	26072	METALS (OTHER THAN MERCURY)
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	26073	METALS (OTHER THAN MERCURY)
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	26074	METALS (OTHER THAN MERCURY)

TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	26075	METALS (OTHER THAN MERCURY)
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	26076	ORGANICS
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	26077	ORGANICS
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	26078	ORGANICS
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	26079	ORGANICS
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	26080	ORGANICS
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	26081	ORGANICS
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	26082	OIL AND GREASE
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	33802	SUSPENDED SOLIDS
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA	33894	ORGANICS

TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	34412	BIOCHEMICAL OXYGEN DEMAND (BOD)
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	34416	BIOCHEMICAL OXYGEN DEMAND (BOD)
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	34417	BIOCHEMICAL OXYGEN DEMAND (BOD)
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	39168	UNLISTED BUT IMPAIRED
TMDL Name *	TMDL ID	Pollutant Name *
LOWER ANACOSTIA RIVER	42380	SUSPENDED SOLIDS

Provide the following information about your outfall latitude longitude.

5. Latitude/Longitude Data Source *	6. Horizontal Reference Datum
Other	WGS84

7. Does your facility discharge into a Municipal Separate Storm Sewer System (MS4)? *

☒ Yes ☐ No

7a. Provide the name of the MS4 Operator *

8. Do you discharge to any of the waters of the U.S. that are designated by the state or tribal authority under its antidegradation policy as a Tier 2 (or Tier 2.5) water (water quality exceeds levels necessary to support propagation of fish, shellfish, and wildlife and recreation in and on the water) (See Appendix L)? *

☐ Yes ☒ No

D: Stormwater Pollution Prevention Plan (SWPPP) Information

SWPPP Contact Information

1. First Name *

Wayne

2. Middle Initial

3. Last Name *

Aguirre

4. Professional Title *

Operations Manager, Superior Concrete

5. Phone (10-digits, No dashes) *

3015778800

6. Extension

7. E-Mail *

waguirre@us-concrete.com

8. Your current SWPPP or certain information from your SWPPP must be made available through one of the following two options. Select one of the options and provide the required information. *

Note: You are not required to post any confidential business information (CBI) or restricted information (as defined in Appendix A) (such information may be redacted), but you must clearly identify those portions of the SWPPP that are being withheld from public access.

☒ Option 1: Maintain a Current Copy of your SWPPP on an Internet page (Universal Resource Locator or URL).

Provide the web address URL *

<https://www.dropbox.com/s/y28rgzbkre9z8rs/Superior%20Conc%20Matls-DC%20SWPPP%20120117.pdf?dl=0>

☐ Option 2: Provide the following information from your SWPPP.

E: Endangered Species Protection

1. Using the instructions in Appendix E of the MSGP, under which endangered species criterion listed in Part 1.1.4.5 are you eligible for coverage under this permit? *

Criterion A – No listed species or critical habitat are in the action area

2. Provide a brief summary of the basis for the criterion selected in Appendix E (e.g., communication with U.S. Fish and Wildlife Service or National Marine Fisheries Service to determine no species in action area; implementation of controls approved by EPA and the Services). *

This facility is located in a heavily urbanized and industrial / commercial area of Washington DC. Any discharge from this facility would go to a streetside catch basin system in the adjacent public roadways, then discharged to the Anacostia River.

F: Historic Preservation

1. If your facility is not located in Indian country lands, is your facility located on a property of religious or cultural significance to an Indian tribe? *

☐ Yes ☒ No

2. Using the instructions in Appendix F of the MSGP, under which historic properties preservation criterion listed in Part 1.1.4.7 are you eligible for coverage under this permit? *

Criterion B - Subsurface stormwater controls will not affect historic properties

Certification Information

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. 40 CFR 122.22 (d)

Certifier E-Mail *

ashepherd@us-concrete.com

Form Action *

Approve